

## Application for tree works: works to treessubject to a tree preservation order (TPO)

### and/or notification of proposed works to trees in aconservation area.

# Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

### Publication of applicationson planning authority websites

Please note that the information provided on thisapplication form and insupporting documentsmay be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitalsand black ink.

You must use this form if you areapplying for work to trees protected by a tree preservation order (TPO). (You may also use it to give notice of works to trees in aconservation area).

It is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / notice cannot proceed.

1. Applicant Name and Address		2. Agent Name and Address	
Title:	Mrs First name: Ruth	Title: Mr First name: James	
Last name:	Pickles	Last name: Farmery	
Company (optional):		Company (optional): Yorkshire Tree Surgery	
Unit:	House House suffix:	Unit: House House suffix:	
House name:		House name: 2 Enholmes Farm Cottages	
Address1:	St Peters Church	Address 1: Enholmes Lane	
Address2:	Church Lane	Address 2:	
Address 3:	Hutton on Cranswick	Address 3:	
Town:		Town: Patrington	
County:		County: East Riding of Yorkshire	
Country:		Country:	
Postcode:	YO25 9PS	Postcode: HU12 0PR	

3. TreesLocation	4. TreesOwnership			
If all treesstand at theaddressshown in Question 1, go to Question 4.Otherwise, please provide the full address/location of thesite where the tree(s) stand (including full postcode whereavailable)	Is the applicant the owner of the tree(s): Ves No If 'No' please provide the address of the owner (if known and if different from the trees location)			
Unit: House House	Title: First name:			
House   name:   Address 1:   Address 2:   Address 3:   Town:   County:   Postcode   (if known):   If the location is unclear or there is not a full postal address, either	Last name:   Company   (optional):   Unit:   House   number:   House   name:   Address 1:   Address 2:   Address 3:   Town:   County:			
describe asclearly as possible where it is(for example, 'Land to the rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or provide an OrdnanceSurvey grid reference: Description:	Country: Postcode: Telephone numbers Country code: National number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address(optional):			
5. What Are You Applying For?	6. Tree Preservation Order Details If you know which TPOprotects the tree(s), enter its title or number			
Are you seeking consent for works to tree(s) Yes No subject to aTPO?	below.			
Are you wishing to carry out works to tree(s) in aconservation area?				
7. Identification Of Tree(s) And Description Of Works				

Please identify the tree(s) and provide a full and clear specification of the works you want to carry out. Continue on aseparatesheet if necessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees are protected by aTPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same numbers on your sketch plan (see guidance notes).

Please provide the following information below: tree species (and the number used on the sketch plan) and description of works. Where trees are protected by aTPO you must also provide reasons for the work and, where trees are being felled, please give your proposals for planting replacement trees (including quantity, species, position and size) or reasons for not wanting to replant.

E.g. Oak (T3) - fell becauseofexcessiveshading and low amenityvalue. Replant with 1standard ashin thesameplace.

Reduce mature Sycamore tree in front entrance of church to its main stem to leave as a monolithic structure. The tree is very old and showing serious signs of decline and is becoming dangerous.

7. Identification Of Tree(s) And Description Of Works continued ...

### 8. Trees - Additional Information

#### Additional information may be attached to electroniccommunicationsor providedseparately in paper format.

#### For all trees

Asketch plan clearly showing the position of trees listed in Question 7 must be provided when applying for works to trees covered
by aTPO. Asketch plan isalso advised when notifying the LPA of works to trees in aconservation area (see guidance notes).
It would also be helpful if you provided details of any advice given on site by an LPA officer.

#### For works to treescovered by a TPO

Please indicate whether the reasons for carrying out the proposed works includeany of the following. If so, your application must be accompanied by the necessary evidence to support your proposals. (See guidance notes for further details)

1.	Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fall:	Yes	□ No
	If YES, you are required to provide written arboricultural advice or other		-
	diagnostic information from an appropriate expert.		

2 Alleged damage to property - e.g. subsidence or damage to drains or drives. If YES, you are required to provide for:

Subsidence

A report by an engineer or surveyor, to include description of damage, vegetation, monitoring data, soil, roots and repair proposals. Also a report from an arboriculturist to support the tree work proposals.

*Otherstructural damage* (e.g. drains, wallsand hard surfaces) Written technical evidence from an appropriate expert, including description of damageand possible solutions.

#### Documentsand plans (for any tree)

Are you providing separate information (e.g. an additional schedule of work for Question 7)?

🗌 Yes 👘 No

🗌 No

Yes

If YES, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application. If they are being provided separately from this form, please detail how they are being submitted.

9. AuthorityEmployee / Member				
With respect to the Authority, lam:				
(a) a member of staff (c) related to a member of staff	Do any of thesestatementsapply to you?			
(b) an elected member (d) related to an elected member	Yes No			
If Yes, please provide details of the name, relationship and role				
10. Application For Tree Works - Checklist				
Only one copy of the application form and additional information (Question 8) is required. Please use the guidance and this checklist to makesure that this form has been completed correctly and that all relevant information issubmitted. Please note that failure to supply precise and detailed information may result in your application being rejected or delayed. You do not need to fill out thissection, but it may help you to submit a valid form.				
Sketch Plan				
<ul> <li>Asketch plan showing the location of all trees (see Question 8)</li> </ul>				
For all trees (see Question 7)				
<ul> <li>Clear identification of the trees concerned</li> </ul>				
<ul> <li>A full and clear specification of the works to be carried out</li> </ul>				
For works to trees protected by a TPO (see Question 7)				
Have you:				
<ul><li>stated reasons for the proposed works?</li></ul>				
• provided evidence in support of thestated reasons? in particular:				
• if your reasons relate to the condition of the tree(s) - written eviden	ce from an			
appropriate expert	<u> </u>			
<ul> <li>if you arealleging subsidence damage - a report by an appropriate and one from an arboriculturist.</li> </ul>	engineer or surveyor			
<ul> <li>in respect of other structural damage - written technical evidence</li> </ul>				
<ul> <li>included all other information listed in Question 8?</li> </ul>				

# 11. Declaration - Trees

I/we hereby apply for planning permission/consent as described in this form and theaccompanying plans/drawingsand additional information. I/we confirm that, to the best of my/our knowledge, any factsstated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.          Signed - Applicant:       Orsigned - Agent:         Date (DD/MM/YYYY):       This date must not be before the date of sending or hand-delivery of the form)				
12. Applicant Contact Details	13. Agent Contact Details			
Telephone numbers       Extension number:         Country code:       National number:         Country code:       Mobile number (optional):         Country code:       Fax number (optional):         Country code:       Fax number (optional):         Email address(optional):       Email address(optional):	Telephone numbers       Extension number:         Country code:       National number:         Country code:       Mobile number (optional):         Country code:       Fax number (optional):         Country code:       Fax number (optional):         Email address(optional):       Email address(optional):			
	james@yorkshiretreesurgery.co.uk			

Electronic communication - If you submit this form by fax or e-mail the LPA may communicate with you in thesame manner. (Please see guidance notes)